

# CERTIFICATE OF ASSUMED BUSINESS NAME **FILED EFFECTIVE**

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

00 APR -5 PM

SECRETARY OF STATE  
STATE OF IDAHO



1. The assumed business name which the undersigned use(s) in the transaction of business is:

North Idaho Rehabilitation Support Services

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Vancorp, Inc.</u>	<u>405 Woodside Avenue</u>
	<u>Post Falls ID 83854</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed:

North Idaho Rehabilitation Support Services  
P.O. Box 1477  
Post Falls, ID 83877-1477

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Vanessa R. Anstine

Printed Name: Vanessa R. Anstine

Capacity: President

(see instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

04/05/2000 09:00  
CL: 4120 CT: 129392 BH: 306187

1 @ 20.00 = 20.00 ASSUM NAME # 2

DB4538